

**Life Threatening Allergies****3.60.061-AD Life Threatening Allergies**

Portland Public schools will utilize team approaches to reduce the risk of potentially life-threatening allergic reactions to food or other allergens at school. Food allergies affect an estimated two to four percent of children. The most common allergies are those to peanuts, milk, nuts, eggs, fish and shellfish, wheat and soy. For potentially life-threatening food allergies, meals and snacks sent from home are the safest option. Following the procedures and guidelines in this directive will help minimize students' potentially life-threatening reactions to foods at school.

I. Definitions

A. Allergy An exaggerated immune response or reaction to substances that are generally not harmful.

B. Licensed Medical Authority In Oregon, recognized medical authorities are physicians, physician assistants, registered dietitians, nurse practitioners and registered nurses.

C. Potentially life-threatening allergy A sudden, severe whole-body reaction to a substance, through ingesting, inhaling or skin contact, which can result in death. Also called "Anaphylaxis/Anaphylactic Reaction," symptoms may include severe itching, hives, sweating, swelling of the throat, breathing difficulties, lowered blood pressure, unconsciousness and even death.

D. Major food allergens Eight foods or food groups identified by the Food and Drug Administration as accounting for 90 percent of all documented food allergies in the U.S. and representing the foods most likely to result in severe or potentially life-threatening reactions. They are milk, eggs, fish, shellfish, tree nuts (including, but not limited to, almonds, walnuts, pecans), peanuts, wheat and soybeans.

E. Team Approach A way to manage potentially life-threatening food allergies at school using the active involvement, knowledge and professional expertise of school, health services, and nutrition services staff, parents/guardians and, if appropriate, the student.

II. General Requirements

Based on input from the school nurse and/or parent guardian, the principal will assess which team members are needed to plan prevention of and response to the allergic reactions. The team may consist of a school administrator/designee, school nurse, parent/guardian and nutrition services staff. Teacher(s), school counselor or

child development specialist and physician may also be included. The student may be included, if old enough and developmentally able to participate.

III. Family's Responsibility

A. The parent/guardian of a child with a potentially life-threatening food allergy is responsible for notifying the school nurse or building administrator or allergies that may result in a medical condition requiring intervention and/or accommodation at school and for participating as part of the team to address the child's needs.

B. The Student Registration Form must be completed and updated every year, and more often if there are changes, with special attention to the emergency contact information and "Medical Information" section, notably

1. "Serious Allergy" and the kind of allergy
2. "Medications at School"

C. Parents/guardians of students with potentially life-threatening food allergies must also provide the school with documentation from a licensed medical authority if special foods or meal substitutions are requested. The documentation must be recorded or attached to the "Medical Statement for Students with Disabilities Requiring Special Foods in Child Nutrition Programs." The form, available from Nutrition Services at every school, must include

1. the diagnosis with a description of the patient's disability and the major life activity affected by the disability
2. how the disability restricts the diet
3. foods to be omitted from the diet
4. foods to be substituted

D. Families must provide properly labeled medications and replace them after use or upon expiration.

E. Parents/guardians are also responsible for teaching their children self-management including

1. what foods cause a reaction; safe and unsafe foods,
2. the importance of avoiding unsafe ones,
3. symptoms of allergic reactions,

4. how and when to tell an adult they may be having an allergy-related problem
5. which adults at school may help them make food choices and from whom they may accept food
6. how to read food labels, as age appropriate

IV. School's Responsibility

A. Principal, principal's designee or school nurse after receiving notification and documentation that a child has a potentially life-threatening allergy, will work with the parent/guardian to develop a written plan that will

1. minimize the specific risks to the child; for example, addressing ways to limit the child's exposure to food(s) containing the specific allergen
2. identify the actions to take in the event of an allergic reaction by the child
3. anticipate school-related events, including, but not limited to field trips, and identify appropriate strategies for managing the food allergy
4. communicate the child's condition to school staff in contact with the student
5. communicate the child's condition to other students in the child's classroom when appropriate as determined by the principal. Such information shall only be shared if the parents of the student with the potentially life-threatening food allergy agree to this communication and provide a signed release of such medical information.
6. provide this staff with awareness of the child's emergency plan and information about how to recognize the symptoms of and respond to an allergic reaction
7. identify building staff that have been trained to perform first aid or life-saving techniques, specifically those who are epinephrine-trained or designated to respond to food allergy emergencies
8. identify building staff to help the child make food choices and from whom the child may accept food
9. designate the location of the student's emergency kit, containing epinephrine, prescribed by his or her physician and accompanied by the physician's order. Medications must be properly stored and kept in

a secure location, quickly accessible to identified school personnel. Students, if old enough and developmentally able, may be allowed to carry their own epinephrine, with the approval from their physician, parent/guardian, school administrator and school nurse

10. require calling 911 and contacting the parent/guardian if a potentially life-threatening allergic reaction occurs
11. evaluate whether the student is eligible for a 504 plan and
12. take any other steps determined necessary by the principal.

B. School staff can help minimize exposure to food allergens by

1. discouraging students from sharing or trading food and utensils during the meal/snack times and all events involving food, including, but not limited to, field trips, parties and celebrations
2. promoting proper hand washing before and after eating
3. keeping classroom and lunch table surfaces clean and sanitized.

C. Nutrition Services staff shall follow Federal guidelines issued by the U.S. Department of Agriculture Food and Nutrition Services for serving children with potentially life-threatening allergies diagnosed by a licensed medical authority. Generally, students with food allergies or intolerances are not "disabled persons" and school districts are not required to make substitutions for them. However, if a physician assesses that food allergies may result in severe potentially life-threatening reactions (anaphylactic reactions), the student may then meet the definition of "disabled person" and the food service personnel must make the substitutions prescribed by the physician.

1. The medical food substitution order written by a licensed medical authority will be kept on file in the cafeteria, in the school office and with the school nurse.
2. A confidential allergy alert will be placed in the school cafeteria's computerized student meal account system.
3. If special foods or meal substitutions are requested, cafeteria staff will consult with Nutrition Services dietitians to screen food labels for product ingredients that may contain allergens to be avoided.

V. Student's Responsibility

A. Students with potentially life-threatening food allergies should be proactive in the care and management of their food allergies and reactions, based on their developmental level, and

1. not trade food with others
2. not eat anything with unknown ingredients or known to contain any allergen
3. not accept food from other students or from adults not authorized to approve their food choices
4. notify an adult immediately if they eat something they believe may contain the food to which they allergic.

Legal References: Individuals with Disabilities Education Act, 20 U.S.C. 1400 et seq; Americans with Disabilities Act of 1990; Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. 794 (a), PL 93-112 Food Allergen Labeling and Consumer Protection Act (FALCPA) of 2004 United States Department of Agriculture Food and Nutrition Service, Accommodating Children with Special Dietary Needs in the School Nutrition Programs, Guidance for School Food Service Staff

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